Fill in this information to identify your case:		
United States Bankruptcy Court for the: Southern District of Mississippi		
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check i

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
. Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case).
. Your full flame		
Write the name that is on you government-issued picture	^r Margaret	
identification (for example, your driver's license or	First name Wells	First name
passport).	Middle name	Middle name
Bring your picture	Williams	
identification to your meeting with the trustee.	Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you	Margaret	
have used in the last 8 years Include your married or	First name Wells Williams	First name
	Middle name	Middle name
maiden names.	Hortman	
	Last name	Last name
	Margaret	
	First name	First name
	W.	
	Middle name	Middle name
	Hortman	
	Last name	Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	xxx - xx - <u>2</u> <u>1</u> <u>5</u> <u>7</u> or 9 xx - xx	xxx - xx

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Debtor 1

Margaret Wells Williams
First Name Middle Name Last Name

Case number	(if known)		 	

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
(EIN) you have used in the last 8 years	Commerce Street Market Business name	Business name
•	Dusiness name	Dusiness name
Include trade names and doing business as names	Business name	Business name
	Dualitess frante	Dualities name
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	9 Twin Oaks Place	
	Number Street	Number Street
	Laurel MS 39440 City State ZIP Code	City State ZIP Code
		8
	Jones County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Cod
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

Margaret Wells Williams Debtor 1 Case number (if known)_ Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing 7. The chapter of the for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. **Bankruptcy Code you** are choosing to file Chapter 7 under Chapter 11 ☐ Chapter 12 ☐ Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No No bankruptcy within the ☐ Yes. District _ Case number last 8 years? MM / DD / YYYY Case number MM / DD / YYYY Case number MM / DD / YYYY 10. Are any bankruptcy No. cases pending or being Yes. Debtor Relationship to you filed by a spouse who is not filing this case with When District Case number, if known_ you, or by a business MM / DD / YYYY partner, or by an affiliate? Relationship to you When Case number, if known_ MM / DD / YYYY 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as

part of this bankruptcy petition.

Margaret Wells Williams Debtor 1 Case number (# known)_ Middle Name Report About Any Businesses You Own as a Sole Proprietor Part 3: 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes, Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or Number Street LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. ZIP Code State Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) ■ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Chapter 11 of the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if **Bankruptcy Code and** any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Part 4: 14. Do you own or have any No No property that poses or is ☐ Yes. What is the hazard? alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed?_ immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street

City

ZIP Code

State

Debtor 1

Margaret Wells Williams

Case number (if known)		
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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Deb	tor	1	;
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You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

_	I am not required to receive a briefing a	about
	credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

u	I am no	ot required	to receive a	briefing	about
			because of		

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Margaret Wells Williams Debtor 1 Case number (# known) Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and No No administrative expenses ☐ Yes are paid that funds will be available for distribution to unsecured creditors? 1.000-5.000 18. How many creditors do 1-49 25,001-50,000 you estimate that you 50-99 50.001-100.000 5,001-10,000 owe? **100-199** 10,001-25,000 More than 100,000 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million 31,000,000,001-\$10 billion be worth? \$10,000,000.001-\$50 billion **2** \$100,001-\$500,000 \$50,000,001-\$100 million \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion 20. How much do you \$500,000,001-\$1 billion \$0-\$50,000 \$1,000,001-\$10 million estimate your liabilities \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million ☐ More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay peone who is not an attorney to help me fill out this document, I have obtained and read the notice required 1 U.S.C. § 342(b). I request relief in accordance with the chapter of title ed States Code, specified in this petition. I understand making a false statement, concealing erty, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$ 000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and Signature of Debtor 2 Executed on Executed on MM / DD / YYYY MM DD

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Debtor 1 Margaret Well First Name Middle Nam		Case number (# know	m)	
or your attorney, if you are epresented by one	I, the attorney for the debtor(s) named in this petition, de to proceed under Chapter 7, 11, 12, or 13 of title 11, Un available under each chapter for which the person is elig the notice required by 11 U.S.C. § 342(b) and, in a case	ted States Code, jible. I also certif	and have explained the relief y that I have delivered to the debtor(s	
f you are not represented by an attorney, you do not need to file this page.	knowledge after an inquiry that the information in the schedules filed wit		05/01/2019	
	Signature of Attorney for Debtor		MM / DD /YYYY	
	Elizabeth M. Boyle		<u> </u>	
	Printed name McDonald & Boyle			
	Firm name			
	1265 Reserve Drive			
	Number Street			
	Venice	FL	34285	
	City	State	ZIP Code	
	Contact phone (941) 223-7308	Email addı	_{ress} embesq@aol.com	
	Ms. Bar No. 4233	MS		
	Bar number	State		

Debtor 1	3 11110111114	ion to identify your case:			
	Marg	aret Wells Williams			
	First Nan		Last Name		
Debtor 2 (Spouse, if fi	iling) First Nar	ne Middle Name	Last Name		
United Sta	tes Bankrup	tcy Court for the: Southern Distric	ct of Mississippi		
Case numl (If known)	ber		···		Check if this is ar amended filing
					·
Officia	I Form	106C			
Sche	dule	C: The Prop	erty You	Claim as Exempt	04/19
Using the paper is ne	property yo	u listed on <i>Schedule A/B: Prop</i>	erty (Official Form 106A	gether, both are equally responsible for s (B) as your source, list the property that dditional Page as necessary. On the top	you claim as exempt. If more
specific do of any app retirement limits the	ollar amou olicable st funds—n exemption	unt as exempt. Alternatively, atutory limit. Some exemptio nay be unlimited in dollar am	you may claim the full ns—such as those for ount. However, if you o t and the value of the p	mount of the exemption you claim. On fair market value of the property bein health aids, rights to receive certain l claim an exemption of 100% of fair ma property is determined to exceed that	g exempted up to the amount penefits, and tax-exempt orket value under a law that
Part 1:	Identif	y the Property You Claim	as Exempt	14 = =	
Ø Yo □ Yo	ou are clai ou are clai	emptions are you claiming? ming state and federal nonbant ming federal exemptions. 11 U ty you list on Schedule A/B to	ruptcy exemptions. 11 l	•	
		on of the property and line on hat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
Line 1	ription:	9 Twin Oaks Place	\$300,000.00	\$\frac{300,000.00}{100%} of fair market value, up to any applicable statutory limit	Miss. Code Ann sec 85-2-1 Homestead Exemption
Brief descr Line 1	ription:	2013 Lexus	\$	□ \$	Miss Code Ann sec 85-3-1 Motor Vehicle Exemption
	dule A/B:			any applicable statutory limit	
Line	ription: from	Household Furnish	\$ <u>700</u>	\$	Miss Code Ann sec 85-3-1 Household goods exemption
	dule A/B:			any apphoable statutory innit	
_		ng a homestead exemption o stment on 4/01/22 and every 3		s filed on or after the date of adjustment	.)
	0				

Debtor 1

Margar	et Wells Willia	ms	Case number (if known)
iret Name	Middle Name	1 ast Name	

Case number (if known)	
------------------------	--

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Health Savings Acct	\$	\$	
ine from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:	401 (k)	\$		
ine from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	- s	
Line from Schedule A/B:	National Control of the Control of t		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	- \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$. 🗆 \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

Schedule C: The Property You Claim as Exempt

☐ 100% of fair market value, up to any applicable statutory limit

page 2 of 2

Line from Schedule A/B:

4 4 4 4 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1			
Debtor 1 Margaret Wells Williams			
First Name Middle Name Debtor 2	Łast Name		
Spouse, if filing) First Name Middle Name	Last Name		
Inited States Bankruptcy Court for the: Southern District of I	Mississippi	1	
Case number(if known)			Check if this is an amended filing
			v
official Forms 107			
Official Form 107	a for India	iduale Filing for Benkrunter	
tatement of Financial Affair			
eas complete and accurate as possible. If two marri formation. If more space is needed, attach a separa	led people are filing te sheet to this for	g together, both are equally responsible for supplyir m. On the top of any additional pages, write your na	ng correct Ime and case
mber (if known). Answer every question.		, , , , , , , , , , , , , , , , , , , ,	
		l milion ess	
Part 1: Give Details About Your Marital Stat	tus and Where Y	ou Lived Before	
. What is your current marital status?			
☐ Married ☑ Not married			
2. During the last 3 years, have you lived anywhere	other than where y	ou live now?	
☑ No			
Yes. List all of the places you lived in the last 3 y	ears. Do not include	e where you live now.	
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2
			lived there
		Same as Debtor 1	lived there Same as Debtor 1
	From		_
Number Street	From	Same as Debtor 1 Number Street	Same as Debtor
Number Street			Same as Debtor
Number Street City State ZIP Code			Same as Debtor
		Number Street	Same as Debtor of From To
		Number Street City State ZIP Code Same as Debtor 1	Same as Debtor of From To
	To	Number Street City State ZIP Code	From To Same as Debtor **
City State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1	From Same as Debtor 1 From To Same as Debtor 2
City State ZIP Code Number Street	To	Number Street City State ZIP Code Number Street	From Same as Debtor of the control of the c
City State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1 Number Street	From Same as Debtor of the control of the c
City State ZIP Code Number Street City State ZIP Code	To	Number Street City State ZIP Code Number Street City State ZIP Code	Same as Debtor From To Same as Debtor From To Community property
City State ZIP Code Number Street City State ZIP Code	To	Number Street City State ZIP Code Number Street City State ZIP Code	Same as Debtor From To Same as Debtor From To

Part 2: Explain the Sources of Your Income

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First Name Middle Name Last N	ame	Case nui	mber (#known)	
Did you have any income from employment Fill in the total amount of income you received If you are filing a joint case and you have inco	from all jobs and all busi	nesses, including part-tin	ne activities.	ndar years?
☑ No ☑ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$7,945.02	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	☐ Operating a business			
For last calendar year: (January 1 to December 31, 2018 YYYY)	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$49,877.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For the calendar year before that:	✓ Wages, commissions, bonuses, tips	s 44,760.00	Wages, commissions, bonuses, tips	\$
(January 1 to December 31, 2017 / YYYY)	Operating a business	Ψ	Operating a business	Y
nclude income regardless of whether that incured unemployment, and other public benefit paym	ome is taxable. Examples ents; pensions; rental inc	of other income are alinome; interest; dividends;	money collected from laws	suits; royalties; and
include income regardless of whether that incure unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	ome is taxable. Examples ents; pensions; rental inc a joint case and you hav	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
Include income regardless of whether that incure unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	ome is taxable. Examples ents; pensions; rental inc a joint case and you hav	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
nclude income regardless of whether that incure unemployment, and other public benefit paym gambling and lottery winnings. If you are filing list each source and the gross income from each No	ome is taxable. Examples ents; pensions; rental inc a joint case and you hav ach source separately. D	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and e under Debtor 1. Gross income from each source
nclude income regardless of whether that incure unemployment, and other public benefit paymembling and lottery winnings. If you are filing list each source and the gross income from each of the process	ome is taxable. Examples ents; pensions; rental including a joint case and you have each source separately. Debtor 1 Sources of income	Gross Income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions and exclusions)
nclude income regardless of whether that incure unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	ome is taxable. Examples ents; pensions; rental including a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions and exclusions)
nclude income regardless of whether that income property and other public benefit payment, and other public benefit payment pambling and lottery winnings. If you are filing sit each source and the gross income from each of the property of	ome is taxable. Examples ents; pensions; rental including a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions) \$ 0.00	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions and exclusions)
nclude income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from each of the property	ome is taxable. Examples ents; pensions; rental including a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions) \$ 0.00 \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions) - \$
Include income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until	ome is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below. Oil Royalty	Gross Income from each source (before deductions and exclusions) \$ 0.00 \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)
Include income regardless of whether that incument the common that income many the common that income many the common that it is to be a surror and the gross income from the common that it is to be a surror and the gross income from the common that it is to be a surror and the gross income from the common that it is to be a surror and the gross income from the common that is to be a surror and the common that	ome is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below. Oil Royalty	Gross Income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once tyou listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions and exclusions) - \$
Include income regardless of whether that include income regardless of whether that include unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from each of the No Press. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2018)	ome is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below. Oil Royalty Oil royalty	Gross Income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions) - \$
For last calendar year: (January 1 to December 31, 2018) For the calendar year before that:	ome is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below. Oil Royalty	Gross Income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once tyou listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions and exclusions) - \$
Include income regardless of whether that inclunemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from each of the proof of the pro	ome is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below. Oil Royalty Oil royalty	Gross Income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions an exclusions) - \$

Margaret Wells Williams Debtor 1 Case number (if known) Middle Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? No. Go to line 7. ☐ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment **Action Financial Services** 01/01/2019 3,600.00 23,000.00 ■ Mortgage Creditor's Name Loan repayment 803 N. 16th St 04/30/2019 ☐ Suppliers or vendors Number Street *Action Financial Services has been Other: unlent monies еrroneously reporting this debt as \$52,000 to credit bureaus to charge for future as yet unpurchased insurance Laurel MS 39440 City ZiP Code ☐ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment ☐ Suppliers or vendors Other __ City ZIP Code State ■ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment

State

ZIP Code

☐ Suppliers or vendors

Other

Case number (if known)_

Margaret Wells Williams

Middle Name

Debtor 1

Within 1 year before you filed for bankruptcy, did nsiders include your relatives; any general partners; orporations of which you are an officer, director, per gent, including one for a business you operate as a uch as child support and alimony.	relatives of any g	eneral partners; p owner of 20% or r	artnerships of which more of their voting	h you are a general partner; securities; and any managing
Yes. List all payments to an insider.				
res. List all payments to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
n insider? nclude payments on debts guaranteed or cosigned No		ayments or trans	fer any property o	n account of a debt that benefited
lithin 1 year before you filed for bankruptcy, did n insider? Include payments on debts guaranteed or cosigned		ayments or trans Total amount paid	fer any property o Amount you still owe	n account of a debt that benefited Reason for this payment Include creditor's name
fithin 1 year before you filed for bankruptcy, did n insider? nolude payments on debts guaranteed or cosigned No	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
fithin 1 year before you filed for bankruptcy, did n insider? □clude payments on debts guaranteed or cosigned No □ Yes. List all payments that benefited an insider.	by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
fithin 1 year before you filed for bankruptcy, did n insider? nolude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider.	by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name Number Street	by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Aithin 1 year before you filed for bankruptcy, did n insider? Include payments on debts guaranteed or cosigned. No Yes. List all payments that benefited an insider. Insider's Name Number Street.	by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment

Margaret Wells Williams

rt 4: Identify Legal Actions, Repos	sessions, and Foreclosu	res	
ist all such matters, including personal injur and contract disputes.		lawsuit, court action, or administrative prod divorces, collection suits, paternity actions, su	
✓ No✓ Yes. Fill in the details.			
Yes. Fill in the details.	Nature of the case	Court or agency	Status of the case
	Nature of the case	Court of agency	Status of the case
Case title	_	Court Name	Pending
			On appeal
	-	Number Street	Concluded
Case number			
		City State ZIP Code	
Case title	-	Court Name	Pending
	-	Number Street	On appeal Concluded
		Number Steet	Concluded
Case number	-	Crty State ZIP Code	
Check all that apply and fill in the details below No. Go to line 11.		ty repossessed, foreclosed, garnished, atta	ched, seized, or levied?
Check all that apply and fill in the details below No. Go to line 11.			ched, seized, or levied? Value of the property
theck all that apply and fill in the details below. No. Go to line 11.	ow.		
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	ow.		
theck all that apply and fill in the details below. No. Go to line 11.	ow.		
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	ow.	erty Date	
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Describe the prop	erty Date	
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Describe the prop	perty Date pened s repossessed. s foreclosed.	
Theck all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happed Property wa	perty Date Dened s repossessed. s foreclosed. s garnished.	
Theck all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happened Property wa Property wa Property wa Property wa Property wa	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happed Property wa	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happened Property wa Property wa Property wa Property wa Property wa	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Value of the property \$\$
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happened Property wa Property wa Property wa Property wa Property wa	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Value of the property \$ Value of the propert
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happened Property wa Property wa Property wa Property wa Property wa	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Value of the property \$ Value of the propert
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happened Property wa Property wa Property wa Property wa Property wa	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. perty Date	Value of the property \$ Value of the propert
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State ZIPo	Explain what happed Property water P	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. pened	Value of the property \$ Value of the propert
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State ZIPo	Explain what happed Property was Property was Property was Property was Describe the property was	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. perty Date	Value of the property \$ Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street Creditor's Name Creditor's Name Number Street	Explain what happed Property water P	pened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. pened s repossessed.	Value of the property \$ Value of the property

	Vame		
		the second secon	_
		k or financial institution, set off any amounts from	you
counts or refuse to make a payment bec	ause you owed a dept?		
No			
Yes. Fill in the details.			
	Describe the action the creditor took	Date action Amount	
	Describe the action the creditor took	was taken	
Creditor's Name			
Number Street	-	\$	
	-		
City State ZIP Code	Last 4 digits of account number: XXXX	X	
thin 1 year before you filed for bankrupte	cv. was any of your property in the po-	ssession of an assignee for the benefit of	
editors, a court-appointed receiver, a cus		330331011 Of all assigned for the belieff of	
· ·	ocoaini, or anomor omorar:		
No			
Yes			
Link Contain Older and Co. 1 th	Alone		
List Certain Gifts and Contribu	Idons		
hin 2 years before you filed for hankrun	toy did you give any gifts with a total	value of more than \$600 per person?	
	tcy, did you give any gifts with a total	value of more than \$600 per person?	
No	tcy, did you give any gifts with a total	value of more than \$600 per person?	
No	tcy, did you give any gifts with a total	value of more than \$600 per person?	
No	tcy, did you give any gifts with a total	value of more than \$600 per person?	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	tcy, did you give any gifts with a total Describe the gifts	Dates you gave Value	
No Yes. Fill in the details for each gift.			
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		Dates you gave Value the gifts	
per person		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you	Describe the gifts	Dates you gave the gifts \$\$ \$\$	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		Dates you gave Value the gifts	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts \$\$ \$ Dates you gave Value	

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1	Margaret Wells Williams First Name Middle Name Last	Case number (# known)		
/ith	in 2 years before you filed for bankru	otcy, did you give any gifts or contributions with a total val	ue of more than \$60	0 to any charity?
Ø I	No			
)	res. Fill in the details for each gift or con	tribution.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
(Charity's Name			\$
-				\$
ī	Number Street			
-	City State ZIP Code			
t 6	List Certain Losses			
⋥ ;	Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Ì				\$
t 7	List Certain Payments or Tran	nefare		
				4
	consulted about seeking bankruptcy	tcy, did you or anyone else acting on your behalf pay or tr or preparing a bankruptcy petition?	ansier any property	to allyone
		reparers, or credit counseling agencies for services required in	your bankruptcy.	
Ø	No			
	Yes. Fill in the details.			
		Description and value of any property transferred	Date payment or transfer was made	Amount of paymer
	Person Who Was Paid		made	
	Number Street			\$
				\$
	City State ZIP Code			
	Email or website address			
	Person Who Made the Payment, if Not You			

Case number (if known)_

Margaret Wells Williams

Debtor 1

	Description and value of any property	transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-			\$
Number Street	-			\$
	-			¥
City State ZIP Code	-			
Email or website address	_			
Person Who Made the Payment, if Not You				
No Yes. Fill in the details.	Description and value of any property	transferred	Data nayment or	Amount of paymo
	Description and value of any property	transferred	Date payment or transfer was made	Amount of payme
Person Who Was Paid				
Number Street	-			\$
-	-			\$
City State ZIP Code]	
Ithin 2 years before you filed for bankrus ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you have No	r business or financial affairs? made as security (such as the granting			
	Description and value of property transferred	Describe any property or debts paid in excha	or payments received inge	Date transfer was made
Person Who Received Transfer				
Person Who Received Transfer Number Street				
Number Street				
Number Street City State ZIP Code				
Number Street City State ZIP Code Person's relationship to you				

Person's relationship to you _____

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are a beneficiary? (The		ankruptcy, did you transfer any proper	ty to a self-settled trus	st or similar device of w	hich you
	iese are often ca	lled asset-protection devices.)			
∠ No					
Yes. Fill in the detai	ils.				
		Description and value of the prope	erty transferred		Date transfer
					was made
Name of trust					
			in consistency of the contract	in augustyratele ter gibryldig og var kreiterfellingst	Magazzar * Transition of the state of the st
t 8: List Certain F	Financial Acc	ounts, Instruments, Safe Deposit	Boxes, and Storag	e Units	
		ikruptcy, were any financial accounts o			henefit
within 1 year before y closed, sold, moved, (or instruments neid in	your name, or for your	penent,
		arket, or other financial accounts; cert	ificates of deposit; sha	ares in banks, credit un	ions,
		ooperatives, associations, and other fi		,	
☐ No					
Yes. Fill in the det	tails.				
		Last 4 digits of account number	Type of account or	Date account was	Last balance befo
				ala a a di a a lal sus assa al	
			instrument	closed, sold, moved,	closing or transfe
Mutual of Ame	erica		instrument	or transferred	closing or transfe
Mutual of Ame				or transferred	
	titution	xxxx- <u>5</u> <u>1</u> <u>8</u> <u>1</u>	☐ Checking		\$65.2
Name of Financial Inst	titution	xxxx- <u>5</u> <u>1</u> <u>8</u> <u>1</u>	☐ Checking ☐ Savings	or transferred	
Name of Financial Inst 320 Park Aven Number Street	titution		☐ Checking ☐ Savings ☐ Money market	or transferred	
Name of Financial Inst 320 Park Aven Number Street New York	nue NY 100	xxxx5 _1 _8 _1 SC Emplyr 014-233E	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage	or transferred	
Name of Financial Inst 320 Park Aven Number Street	titution 1UE	xxxx5 _1 _8 _1 SC Emplyr 014-233E	☐ Checking ☐ Savings ☐ Money market	or transferred	
Name of Financial Inst 320 Park Aven Number Street New York	nue NY 100	xxxx5 _1 _8 _1 SC Emplyr 014-233E	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☑ Other 403 3 b	or transferred	
Name of Financial Inst 320 Park Aven Number Street New York	NY 100 State ZIP Co	xxxx5 _1 _8 _1 SC Emplyr 014-233E	Checking Savings Money market Brokerage Cother 403 3 b Checking	or transferred	
Name of Financial Inst 320 Park Aven Number Street New York City	NY 100 State ZIP Co	xxxx5 _1 _8 _1 SC Emplyr 014-233E	Checking Savings Money market Brokerage Cother 403 3 b Checking Savings	or transferred	
Name of Financial Inst 320 Park Aven Number Street New York City	NY 100 State ZIP Co	xxxx5 _1 _8 _1 SC Emplyr 014-233E	Checking Savings Money market Brokerage Cother 403 3 b Checking	or transferred	
Name of Financial Inst 320 Park Aven Number Street New York City Name of Financial Inst	NY 100 State ZIP Co	xxxx5 _1 _8 _1 SC Emplyr 014-233E	Checking Savings Money market Brokerage Cother 403 3 b Checking Savings	or transferred	
Name of Financial Inst 320 Park Aven Number Street New York City Name of Financial Inst	NY 100 State ZIP Co	xxxx5 _1 _8 _1	Checking Savings Money market Brokerage Cother 403 3 b Checking Savings Money market	or transferred	

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ve you stored property in a stor	rage unit or place other than your hor	ne within 1 year before you filed for bankruptc	v?
No			, .
Yes. Fill in the details.			
	Who else has or had access	to it? Describe the contents	Do you sti have it?
			□ No
Name of Storage Facility	Name		☐ Yes
Number Street	Number Street		
	CityState ZIP Code		
City State Z	ZIP Code		
9: Identify Property Yo	ou Hold or Control for Someone	Else	
o you hold or control any prope	erty that someone else owns? Include	any property you borrowed from, are storing	for,
hold in trust for someone.		, ,	,
No			
Yes. Fill in the details.			
	Where is the property?	Describe the property	Value
Owner's Name			
Owner's Name			\$
Owner's Name Number Strect	Number Street		Φ
	Number Street		\$
Number Street	City Stat	te ZIP Code	\$
Number Street City State 2	ZIP Code City Stat	te ZIP Code	\$
Number Street City State 2	City Stat	te ZIP Code	\$
Number Street City State 2 10: Give Details About	ZIP Code City State Environmental Information	ie ZIP Code	\$
Number Street City State 2 10: Give Details About the purpose of Part 10, the followard formula is any few proving the purpose of Part 10.	City State Environmental Information wing definitions apply: deral, state, or local statute or regula	tion concerning pollution, contamination, relea	ases of
Number Street City State 2 10: Give Details About the purpose of Part 10, the following the purpose of Par	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land,	tion concerning pollution, contamination, releases	ases of
Number Street City State 2 10: Give Details About the purpose of Part 10, the following formula law means any few azardous or toxic substances, we cluding statutes or regulations	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub	tion concerning pollution, contamination, relea soil, surface water, groundwater, or other med stances, wastes, or material.	ases of ium,
Number Street City State 2 10: Give Details About the purpose of Part 10, the following formula law means any few details according statutes or regulations of the means any location, facility,	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub	tion concerning pollution, contamination, relea soil, surface water, groundwater, or other med stances, wastes, or material. vironmental law, whether you now own, operat	ases of ium,
Number Street City State 2 10: Give Details About in the purpose of Part 10, the followarizonmental law means any few paradous or toxic substances, we cluding statutes or regulations it to means any location, facility, filize it or used to own, operate, azardous material means anythmeans anythm	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env or utilize it, including disposal sites.	tion concerning pollution, contamination, released, surface water, groundwater, or other med stances, wastes, or material. vironmental law, whether you now own, operated as a hazardous waste, hazardous substance, toxi	ases of ium, e, or
Number Street City State 2 10: Give Details About in the purpose of Part 10, the followarizonmental law means any few paradous or toxic substances, we cluding statutes or regulations it to means any location, facility, filize it or used to own, operate, azardous material means anythmeans anythm	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env	tion concerning pollution, contamination, released, surface water, groundwater, or other med stances, wastes, or material. vironmental law, whether you now own, operated as a hazardous waste, hazardous substance, toxi	ases of ium, e, or
Number Street City State 2 10: Give Details About the purpose of Part 10, the followard of the purpose of the purpose of Part 10, the followard of the purpose of th	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env or utilize it, including disposal sites.	tion concerning pollution, contamination, released, soil, surface water, groundwater, or other med stances, wastes, or material. vironmental law, whether you now own, operated as a hazardous waste, hazardous substance, toxin.	ases of ium, e, or
Number Street City State 2 10: Give Details About the purpose of Part 10, the followard formental law means any few azardous or toxic substances, will be cluding statutes or regulations for means any location, facility, cilize it or used to own, operate, azardous material means anythe abstance, hazardous material, port all notices, releases, and province of the control of the	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env or utilize it, including disposal sites, sing an environmental law defines as collutant, contaminant, or similar terr	tion concerning pollution, contamination, released, surface water, groundwater, or other med stances, wastes, or material. Aironmental law, whether you now own, operate a hazardous waste, hazardous substance, toxin. Teless of when they occurred.	ases of ium, e, or
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City State 2 10: Give Details About the purpose of Part 10, the following formulations or toxic substances, we could not statutes or regulations it to means any location, facility, tilize it or used to own, operate, azardous material means anythous tance, hazardous material, port all notices, releases, and process any governmental unit notified.	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env or utilize it, including disposal sites, sing an environmental law defines as collutant, contaminant, or similar terr	tion concerning pollution, contamination, released, surface water, groundwater, or other med stances, wastes, or material. Aironmental law, whether you now own, operate a hazardous waste, hazardous substance, toxin. Teless of when they occurred.	ases of ium, e, or
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City State 2 10: Give Details About the purpose of Part 10, the following programmental law means any few azardous or toxic substances, we coulding statutes or regulations the means any location, facility, tilize it or used to own, operate, we will be a sample of all notices, releases, and programmental unit notifications.	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env or utilize it, including disposal sites, sing an environmental law defines as collutant, contaminant, or similar terr occeedings that you know about, regar	tion concerning pollution, contamination, released, surface water, groundwater, or other med stances, wastes, or material. vironmental law, whether you now own, operate a hazardous waste, hazardous substance, toxin. rdless of when they occurred. Intially liable under or in violation of an environ	ases of ium, e, or ic mental law?
City State 2 10: Give Details About the purpose of Part 10, the followard of the purpose of Part 10, the followard of the purpose of the purpos	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env or utilize it, including disposal sites, sing an environmental law defines as collutant, contaminant, or similar terr occeedings that you know about, regar ed you that you may be liable or pote	tion concerning pollution, contamination, released, surface water, groundwater, or other med stances, wastes, or material. vironmental law, whether you now own, operate a hazardous waste, hazardous substance, toxin. rdless of when they occurred. Intially liable under or in violation of an environ	ases of ium, e, or ic mental law?
City State 2 10: Give Details About the purpose of Part 10, the following programmental law means any few azardous or toxic substances, we coulding statutes or regulations the means any location, facility, tilize it or used to own, operate, we will be a sample of all notices, releases, and programmental unit notifications.	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env or utilize it, including disposal sites, sing an environmental law defines as collutant, contaminant, or similar terr occeedings that you know about, regar	tion concerning pollution, contamination, released, surface water, groundwater, or other med stances, wastes, or material. vironmental law, whether you now own, operate a hazardous waste, hazardous substance, toxin. rdless of when they occurred. Intially liable under or in violation of an environ	ases of ium, e, or ic mental law?
City State 2 10: Give Details About the purpose of Part 10, the followard of the purpose of Part 10, the followard of the purpose of the purpos	Environmental Information wing definitions apply: deral, state, or local statute or regula wastes, or material into the air, land, controlling the cleanup of these sub or property as defined under any env or utilize it, including disposal sites, sing an environmental law defines as collutant, contaminant, or similar terr occeedings that you know about, regar ed you that you may be liable or pote	tion concerning pollution, contamination, released, surface water, groundwater, or other med stances, wastes, or material. vironmental law, whether you now own, operate a hazardous waste, hazardous substance, toxin. rdless of when they occurred. Intially liable under or in violation of an environ	ases of ium, e, or ic mental law?

na Margaret Wells Williams		Case number (if known)	
First Name Middle Name	Last Name		
lave you notified any governmental	unit of any release of hazardous materia	il?	
☑ No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Name of site	Governmental unit		
Number Street	Number Street		
	Namber Silect		
	City State ZIP Code		
City State ZIP C	Code		
lave vou been a party in any judicia	I or administrative proceeding under any	environmental law? Include settlemen	te and orders
	or administrative proceeding under any	environmentariaw: include settlemen	ts and orders.
No			
Yes. Fill in the details.			Status of the
	Court or agency	Nature of the case	case
Case title	- 22		
	Court Name	-	Pending
			On appea
	Number Street	_	☐ Conclude
Case number	City State ZIP Cod	e	
rt 11: Give Details About Yo	ur Business or Connections to Any	Business	
Within 4 years before you filed for b	ankruptcy, did you own a business or ha	ive any of the following connections to	any business?
	loyed in a trade, profession, or other ac		
	y company (LLC) or limited liability partr		
A partner in a partnership			
An officer, director, or manage	ging executive of a corporation		
☐ An owner of at least 5% of th	e voting or equity securities of a corpora	ation	
No. None of the above applies. C	o to Part 12		
	and fill in the details below for each busi	ness	
	Describe the nature of the busines		n number
Business Name		Do not include Social	Security number or ITIN.
Business Name			
Number Chart		EIN:	
Number Street	Name of accountant or bookkeepe	Dates business existe	d
		From To	·
City State ZIP	Code		
	Describe the nature of the busines		
Business Name		Do not include Social	Security number or ITIN.
		EIN: -	
Number Street		EIN:	
	Name of accountant or bookkeepe	Dates business existe	d
		From To	·
City State ZIP	Code		

Debtor 1	Margaret Wells Williams First Name Middle Name Last		Case number (# known)
	waddie Name Last	Name	Walliam Committee of the Committee of th
		Department of the second of th	Employee Identification
	Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	Dustiless latifie		
	Number Street		EIN:
		Name of accountant or bookkeeper	Dates business existed
	City State ZIP Code		From To
			and the same and t
	The section of the se	and the second section of the second section is a second section of the second section in the second section is	
28. With	hin 2 years before you filed for bankrup	tcy, did you give a financial statement	to anyone about your business? Include all financial
	, and parties.		, and the state of
Ø			
	Yes. Fill in the details below.		
		Date issued	
	Name		
		MM / DD / YYYY	
	Number Street		
	City State ZIP Code		
Part 1:	3 Sign Below		
l ha	ive read the answers on this Statement	of Einapoint Affaire and any the	
ans	wers are true and correct. I understand	I that making a false statement, conce	nts, and I declare under penalty of perjury that the aling property, or obtaining money or property by fraud
18 1	onnection with a bankruptcy case can J.S.C. §§ 152, 1341, 1519, and 3571.	result in fines up to \$250,000, or impri	sonment for up to 20 years, or both.
	\. I I		
6	W 4	A.0	
~	N	×	
	Signature of Debror 1	Signature of Debtor 2	
	Date 5/1/2019	- 4	
		Date	
		atement of Financial Affairs for Individ	luals Filing for Bankruptcy (Official Form 107)?
	No Yes		
	Yes		
Did			
₽ id	you pay or agree to pay someone who	is not an attorney to help you fill out b	ankruptcy forms?
	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
NV (condition) to the second			such, and digitature (Official Form 119).
		The second secon	expensional control of the second control of

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 12

Save As...

Add Attachment

Fill in this information to identify your case and thi	s filing:		
Debtor 1 Margaret Wells Williams			
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Southern District o	f Mississippi		
Case number			Check if this is an
		_	amended filing
Official Form 106A/B			
Schedule A/B: Propert	V		12/15
category where you think it fits best. Be as compresponsible for supplying correct information. If n write your name and case number (if known). Ans	is. List an asset only once. If an asset fits in more ete and accurate as possible. If two married people ore space is needed, attach a separate sheet to the wer every question. Land, or Other Real Estate You Own or Have	e are filing together, bo is form. On the top of a	th are equally
 Do you own or have any legal or equitable interest No. Go to Part 2. 	est in any residence, building, land, or similar prop	erty?	
Yes. Where is the property?			
1.1. 9 Twin Oaks Place	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
Street address, if available, or other description	Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property? \$ 300,000.00	Current value of the portion you own?
Laurel MS 39440	Investment property	Ψ	<u> </u>
City State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee	simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a life Fee Simple	e estate), if known.
Jones	Debtor 1 only	1 ee Oimpie	
County	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
	Other information you wish to add about this it property identification number: <u>Tax ID# 134</u>		
If you own or have more than one, list here:	What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair.	d claims on Schedule D:
1.2. Street address, if available, or other description	☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	
	Land	\$	\$
City State ZIP Code	Investment property Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
County	☐ Debtor 1 only ☐ Debtor 2 only		
County	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	ommunity property
	Other information you wish to add about this ite property identification number:	m, such as local	

Official Form 106A/B

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Case number (if known)_

Margaret Wells Williams

Debtor 1

1.3.			What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
	Street address, if available	, or other description	Duplex or multi-unit building	Current value of the	
	-31:	700.00	Condominium or cooperative	entire property?	portion you own?
		700.00	☐ Manufactured or mobile home ☐ Land	\$	\$
	City Code	State ZIP	☐ Investment property	VIOL.	
	Code		☐ Timeshare	Describe the nature of	
			Other	interest (such as fee the entireties, or a life	
			Who has an interest in the property? Check one.		
	_ County		Debtor 1 only		
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		ommunity property
			At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this ite property identification number:		
dd t	he dollar value of the p	ortion you own for a	II of your entries from Part 1, including any entries there.	s for pages	\$
	100 00 50	al or equitable intere	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts		s
/ou c own	own, lease, or have legathat someone else driver vans, trucks, tractors,	al or equitable intere s. If you lease a vehicl	e, also report it on Schedule G: Executory Contracts		s
ou cown cars,	own, lease, or have legathat someone else driver vans, trucks, tractors, o	al or equitable intere s. If you lease a vehicl sport utility vehicles	e, also report it on Schedule G: Executory Contracts , , motorcycles	and Unexpired Leases.	
ou o own ars, N	own, lease, or have legathat someone else drives vans, trucks, tractors, oes	al or equitable intere s. If you lease a vehicles sport utility vehicles Lexus	e, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured of the amount of any secure	aims or exemptions. Put ed claims on <i>Schedule D</i> .
ou o wn ars,	own, lease, or have legathat someone else driver vans, trucks, tractors, o	al or equitable interes. If you lease a vehicles sport utility vehicles	e, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only	and Unexpired Leases. Do not deduct secured cl	aims or exemptions. Put ed claims on <i>Schedule D</i>
ou o wn ars,	own, lease, or have legathat someone else drives vans, trucks, tractors, oes	al or equitable interes. If you lease a vehicles sport utility vehicles Lexus 250 IS 2013	e, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured che amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on <i>Schedule D</i> ms Secured by Property. Current value of t i
ou o wn ars,	own, lease, or have legathat someone else drives vans, trucks, tractors, o es Make: Model:	al or equitable interes. If you lease a vehicles sport utility vehicles	e, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	and Unexpired Leases. Do not deduct secured classes the amount of any secure Creditors Who Have Class	aims or exemptions. Put ed claims on <i>Schedule D</i> ms Secured by Property.
ou o own ars, N	own, lease, or have legathat someone else driver vans, trucks, tractors, o es Make: Model: Year:	al or equitable interes. If you lease a vehicles sport utility vehicles Lexus 250 IS 2013	e, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ad claims on <i>Schedule D</i> ims Secured by Property. Current value of the portion you own?
ou o own ars, N	own, lease, or have legathat someone else drives vans, trucks, tractors, o es Make: Model: Year: Approximate mileage:	Lexus 250 IS 100000	e, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured che amount of any secure Creditors Who Have Clair	aims or exemptions. Put ad claims on <i>Schedule D</i> ims Secured by Property. Current value of ti portion you own?
vou cown cars, N Y vo	own, lease, or have legathat someone else driver vans, trucks, tractors, ones Make: Model: Year: Approximate mileage: Other information:	Lexus 250 IS 2013 100000 , recall	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ad claims on <i>Schedule D</i> ims Secured by Property. Current value of the portion you own?
ou counce on the second of the	own, lease, or have legathat someone else driver vans, trucks, tractors, or es Make: Model: Year: Approximate mileage: Other information: Accident damage	Lexus 250 IS 2013 100000 , recall	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	and Unexpired Leases. Do not deduct secured class the amount of any secure Creditors Who Have Class Current value of the entire property? \$ 7,000.00	aims or exemptions. Put ad claims on Schedule D. ms Secured by Property. Current value of the portion you own? \$ 7,000.0
ou cown	own, lease, or have legathat someone else driver vans, trucks, tractors, or have legathat someone else driver vans, trucks, tractors, or les Make: Model: Year: Approximate mileage: Other information: Accident damage	Lexus 250 IS 2013 100000 , recall	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 7,000.00	aims or exemptions. Put ed claims on Schedule Do ms Secured by Property. Current value of the portion you own? \$
vou commonwer of your figures.	own, lease, or have legathat someone else driver vans, trucks, tractors, or es Make: Model: Year: Approximate mileage: Other information: Accident damage own or have more than Make: Model:	Lexus 250 IS 2013 100000 , recall	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 7,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ad claims on Schedule Doms Secured by Property. Current value of the portion you own? \$ 7,000.0
ou cown	own, lease, or have legathat someone else driver vans, trucks, tractors, or es Make: Model: Year: Approximate mileage: Other information: Accident damage own or have more than Make: Model: Year:	Lexus 250 IS 2013 100000 , recall	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 1 only Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 7,000.00	laims or exemptions. Put ad claims on Schedule Dims Secured by Property. Current value of the portion you own? \$ 7,000.0 Italiams or exemptions. Put ad claims on Schedule Dims Secured by Property. Current value of the secured of the secured by Property.
you cown Cars, N Your	own, lease, or have legathat someone else driver vans, trucks, tractors, or es Make: Model: Year: Approximate mileage: Other information: Accident damage own or have more than Make: Model:	Lexus 250 IS 2013 100000 , recall	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 7,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	laims or exemptions. Put ad claims on Schedule Doms Secured by Property. Current value of the portion you own? \$ 7,000.0

Official Form 106A/B

Debtor 1

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Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.4. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.1. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

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Debtor 1

	10/ 11	1.6.5141
Margaret	vveiis	VVIIIIams

Margaret Wells Williams
First Name Middle Name Case number (if known)_ Last Name

Do you own or have any legal or equitable interest in any of the following items? Contract value of the portion you own? Contract value of the portion of	Part 3:	Describe Your Po	ersonal and Household Items		
Examples. Najor appliances, furniture \$ 300.00 7. Electronics Examples. Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections, electronic devices including cell phones, cameras, media players, games 1 No 1 Yes. Describe	Do you o	wn or have any legal	or equitable interest in any of the following items?	portion you Do not deduct	own?
Examples. Najor appliances, furniture \$ 300.00 7. Electronics Examples. Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections, electronic devices including cell phones, cameras, media players, games 1 No 1 Yes. Describe	6. House	hold goods and furr	nishings		
Electronics					
Electronics					
Examples: Televisions and ractios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes, Describe	☑ Ye	s. Describe Fu	ırniture	\$	300.00
collections, electronic devices including cell phones, cameras, media players, games No Yes. Describe	7. Electro	onics			
		collections; elect			
8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles W No				_	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	∠ Ye	s. Describe Co	omputer, TV	\$	100.00
stamp, coin, or baseball card collections, other collections, memorabilia, collectibles No	8. Collect	tibles of value			
9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe		stamp, coin, or b			
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks, carpentry tools, musical instruments No				\$	
No Yes. Describe		oles: Sports, photogra	phic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes		
□ Yes. Describe		•	entry tools, musical instruments		
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe				\$	
No Yes. Describe 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe	10. Firearr	ns			
11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Everyday clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe Wedding ring and engagement ring 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe	Examp	oles: Pistols, rifles, sho	otguns, ammunition, and related equipment	_	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe	☐ Ye	s. Describe		\$	
No Yes. Describe Everyday clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe Wedding ring and engagement ring 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe	11. Clothe	s			
Yes. Describe Everyday clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe Wedding ring and engagement ring 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe two cats 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information \$	Examp	oles: Everyday clothes	s, furs, leather coats, designer wear, shoes, accessories		
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe				_	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	☑ Ye	s. Describe E	veryday clothes	\$	100.00
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	40 Januale				
Yes. Describe		oles: Everyday jewelry	r, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
Wedding ring and engagement ring 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe	☐ No	_		_	
13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe two cats 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information	☑ Ye	s. DescribeW	/edding ring and engagement ring	\$	200.00
No Yes. Describetwo cats 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information					
Yes. Describe	Examp	oles: Dogs, cats, birds	, horses		
Yes. Describe	□ No				
14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information	☑ Ye	s. Describetw	vo cats	\$	
Yes. Give specific information				reads	
Yes. Give specific information	No.				
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$ 700.00	☐ Ye	s. Give specific		\$	
······································		ne dollar value of all	of your entries from Part 3, including any entries for pages you have attached	\$	700.00

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Debtor 1

Margaret Wells Williams
First Name Middle Name Last Name

Case number (if know)	

Oo you own or have any	legal or equitable interest in	any of the following?		Current va portion you Do not deduct or exemption	u own? ct secured claim
	have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you	ı file your petition		
☐ No ☑ Yes			Cash:	. \$	20.00
		unts; certificates of deposit; shares in credit unio nultiple accounts with the same institution, list ea		5,	
No Yes		Institution name:			
	17.1. Checking account:	Capitol One Bank		. \$	-40.00
	17.2. Checking account:			. \$	
	17.3. Savings account:			. \$	
	17.4. Savings account:			. \$	
	17.5. Certificates of deposit:			· \$	
	17.6. Other financial account:			- \$	
	17.7. Other financial account:			. \$	
	17.8. Other financial account:			- \$	
	17.9. Other financial account:	-		- \$	
	or publicly traded stocks	erage firms, money market accounts			
No No	involution dooding with broke	orage iiiio, iiiotie, iiiaiket accounte			
☐ Yes	Institution or issuer name:				
				\$	
				\$	
				_ \$	
an LLC, partnership,	and joint venture	orated and unincorporated businesses, inclu			
✓ No✓ Yes. Give specific	Name of entity:		% of ownership:	•	
information about					
them			%	•	

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20.		orate bonds and other negotiable and non-negotiable instruments	
		nclude personal checks, cashiers' checks, promissory notes, and money orders. ents are those you cannot transfer to someone by signing or delivering them.	
	☑ No		
	Yes. Give specific information about	Issuer name:	•
	them		Φ
			\$ \$
			Ψ
21.	Retirement or pension	accounts RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	No No	th, Enton, needin, 401(k), 400(b), think savings accounts, or other pension of profit-sharing plans	
	Yes. List each		
	account separately.	Type of account: Institution name:	
		401(k) or similar plan: Liberty (Forrest General Hospital current new employer)	\$200.00
		Pension plan:	\$
		IRA:	\$
		Retirement account:	\$
		Keogh:	\$
		Additional account:	\$
		Additional account:	\$
22	Examples: Agreements companies, or others	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
	No No		
	☐ Yes	Institution name or individual: Electric:	_
		Gas:	\$
			\$
		Heating oil: Security deposit on rental unit:	\$
		Prepaid rent:	\$
		Telephone:	\$
		Water:	\$
			\$
			\$
		Other:	\$
23	.Annuities (A contract fo	r a periodic payment of money to you, either for life or for a number of years)	
	☑ No		
	☐ Yes	Issuer name and description:	
			\$
			\$
			\$

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Debtor 1 Margaret Wells Williams
First Name Middle Name Last Name

Case number (if known)

☑ No	A(b), and 529(b)(1).			
☐ Yes	·· Institution name s	and description. Separately file the records of any intere	noto 11 II S C S E21/a	۸.
	institution name a	and description. Separately life the records of any inter-	esis.11 0.5.C. § 521(c).
				\$
	-			\$
				\$
.Trusts, equitable or future	interests in propert	ty (other than anything listed in line 1), and rights o	r powers	
exercisable for your benefit	it			
No No	Martin Market destroy, material control of membership of performance		nahvushjavat krahikarat. Yasaran tili gasa n sa. skira androniska. In saturakse oci sa sarnita taransas.	
Yes. Give specific information about them	[\$
	The state of the s	A A A A A A A A A A A A A A A A A A A	And the state of the same of t	
		ts, and other intellectual property beeds from royalties and licensing agreements		
☑ No	, модоков, р.с			
Yes. Give specific			rijan arroman aprilo horoninaringanininana antanapatarinana (1,5,5,7%). Si Si Siranina arribanta anta	arrang E
information about them				\$
			independent of the state of the second section of the	_
Licenses, franchises, and			antawat Barwara	
	exclusive licenses, c	cooperative association holdings, liquor licenses, profes	ssional licenses	
No No	yr nug tirrens episos nacioner nesor naprimba i registromen en e	announce that and an ordinary control of the state of the		7
Yes. Give specific information about them	1			\$
mormation about them				
oney or property owed to yo	ou?			Current value of th
				portion you own?
				Do not deduct secured claims or exemptions.
Tax refunds owed to you				
No				
1 100	ation	Territoria Ingelia Material Administration ()		•
T Ves Give specific inform	ation		Federal:	\$
Yes. Give specific inform about them, including	ng whether			
about them, including you already filed the	e returns		State:	\$
about them, including	e returns		State: Local:	\$ \$
about them, including you already filed the	e returns			\$ \$
about them, including you already filed the and the tax years Family support	e returns		Local:	\$ \$
about them, including you already filed the and the tax years Family support Examples: Past due or lump	e returns	sal support, child support, maintenance, divorce settlen	Local:	\$ \$
about them, including you already filed the and the tax years Family support Examples: Past due or lump	e returns	sal support, child support, maintenance, divorce settlen	Local:	\$ \$
about them, including you already filed the and the tax years Family support Examples: Past due or lump	e returns	sal support, child support, maintenance, divorce settlen	Local: nent, property settleme	\$s
about them, including you already filed the and the tax years Family support Examples: Past due or lump	e returns	sal support, child support, maintenance, divorce settlen	Local: nent, property settleme	\$
about them, including you already filed the and the tax years Family support Examples: Past due or lump	e returns	sal support, child support, maintenance, divorce settlen	Local: nent, property settleme Alimony: Maintenance:	\$ \$
about them, including you already filed the and the tax years Family support Examples: Past due or lump	e returns	sal support, child support, maintenance, divorce settlen	Local: nent, property settleme Alimony: Maintenance: Support:	\$\$ \$\$
about them, including you already filed the and the tax years Family support Examples: Past due or lump	e returns	sal support, child support, maintenance, divorce settlen	Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement:	\$\$ \$\$
about them, including you already filed the and the tax years Family support Examples: Past due or lump	e returns	sal support, child support, maintenance, divorce settlen	Local: nent, property settleme Alimony: Maintenance: Support:	\$\$ \$\$
about them, including you already filed the and the tax years Family support Examples: Past due or lump No Yes. Give specific inform Other amounts someone of Examples: Unpaid wages, d	e returns sum alimony, spous nation	ayments, disability benefits, sick pay, vacation pay, wo	Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$\$ \$\$
about them, including you already filed the and the tax years Family support Examples: Past due or lump No Yes. Give specific inform Other amounts someone of Examples: Unpaid wages, disocial Security by	e returns sum alimony, spous nation	ayments, disability benefits, sick pay, vacation pay, wo s you made to someone else	Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$\$ \$\$
about them, including you already filed the and the tax years Family support Examples: Past due or lump No Yes. Give specific inform Other amounts someone of Examples: Unpaid wages, d	e returns o sum alimony, spous nation owes you lisability insurance pa	ayments, disability benefits, sick pay, vacation pay, wo	Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$

Official Form 106A/B

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Margaret Wells Williams Debtor 1 Case number (if known) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... Forrest General Hospital Emplyr 0.00 0.00 HSA/Life Ins- new employer 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ✓ No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue M No ☐ Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Yes. Describe each claim. 35. Any financial assets you did not already list No No ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 180.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No No Yes. Describe...... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe......

Official Form 106A/B

Marganet 3/0el/s/Waliabakt 1 Filed 05/01/19 Entered 05/01/19 and 6:10:42 Page 30 of 59 Debtor 1 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade M No ☐ Yes. Describe..... 41. Inventory No. Yes. Describe... 42. Interests in partnerships or joint ventures **☑** No Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list No No Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46.Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish **☑** No ☐ Yes.....

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Debtor 1		Vells Williams			C	ase number (if known)		
	First Name	Middle Name Last	Name					
40 Cuana	aithar arawin	v or homicated						
48.Crops—	either growing	j or narvesteu						
	. Give specific							
infor	rmation						\$	
	nd fishing equi	pment, implements, m	achinery, fixtures,	and tools	of trade			
☑ No ☐ Yes							1	
							\$	
50 Farm an	nd fishing sum	olies, chemicals, and fe	ed				-	
☑ No		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Yes							1	
							\$	
-	m- and comme	rcial fishing-related pr	operty you did no	t already l	ist			
No Ves	. Give specific						1	
info	rmation					<u> </u>	\$	
52. Add the	e dollar value o	of all of your entries fro	om Part 6, includin	ig any enti	ries for pages	you have attached	•	
for Part	t 6. Write that r	umber here				→	P	
Part 7:	Describe A	All Property You ()wn or Have a	n Intere	st in That	You Did Not List Above		
		operty of any kind you country club membership	did not already lis	st?				
☑ No								
	. Give specific						\$	
11110	///actorr						Ψ \$	
54. Add the	dollar value o	f all of your entries fro	m Part 7. Write th	at number	here	→	\$	0.00
Part 8:	List the T	otals of Each Pari	t of this Form					
								00.000.00
55. Part 1:	Total real esta	te, line 2		••••			\$3	00,000,000
56. Part 2:	Total vehicles,	line 5		\$	7 ₇ 000.00			
57 Part 3:	Total personal	and household items,	line 15	\$	700.00			
					180.00			
58. Part 4:	Total financial	assets, line 36		\$				
59. Part 5:	Total business	-related property, line	45	\$	0.00			
60. Part 6:	Total farm- and	d fishing-related prope	rty, line 52	\$	0.00			
61. Part 7:	Total other pro	operty not listed, line 5	4	+ \$	0.00			
				<u> </u>	7,880.00			7 000 00
62. Total p	ersonal proper	ty. Add lines 56 through	61	\$	1,000.00	Copy personal property total >	+\$	7,880.00
						5		
63. Total of	f all property o	n Schedule A/B. Add li	ne 55 + line 62				\$	307,880.00

Official Form 106A/B

Schedule A/B: Property

page 10

Debtor 1	Margaret Wells Williams			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	First Name	Middle Name	Last Name	
	Bankruptcy Court fo	r the: Southern District of	Mississippi	
Case number	_			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - 📂 🝌. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Reverse Mortgage Funding, LLC	Describe the property that secures the claim:	\$_525,000.00	\$ 300,000.00	300,000.0
Creditor's Name 3900 Capital City Blvd Number Street	9 Twin Oaks Place, Laurel, MS 39440			
Lansing	As of the date you file, the claim is: Check all that apply.	···		
	☐ Contingent			
MI 48,906.1 City State ZIP Code				
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
At least one of the debtors and another				
	M Other (including a right to offset) Reverse Mortgage	۵		
☐ Check if this claim relates to a community debt	Other (including a right to offset) Reverse Mortgage by Mother, dec	e eased November 1	18, 2018	
	Other (including a right to offset) Reverse Mortgage by Mother, dec	<u>e</u> eased November 1	18, 2018	
community debt Date debt was incurred Action Financial Services	by Mother, dec	e eased November 2		\$ 18,000.00
community debt Date debt was incurred Action Financial Services Creditor's Name 803 N. 16th St, Suite A	by Mother, dec	eased November		\$ 18,000.00
community debt Date debt was incurred Action Financial Services Creditor's Name	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles	\$ 23,000.00		\$ 18,000.00
community debt Date debt was incurred Action Financial Services Creditor's Name 803 N. 16th St, Suite A	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply.	\$ 23,000.00	\$ 5,000.00	\$ 18,000.00
community debt Date debt was incurred Action Financial Services Creditor's Name 803 N. 16th St, Suite A Number Street	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent	\$ 23,000.00		\$ 18,000.00
community debt Date debt was incurred Action Financial Services Creditor's Name 803 N. 16th St, Suite A	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	*Action Financial erroneously repo	\$ 5,000.00	\$ <u>18,000.00</u>
community debt Date debt was incurred 2 Action Financial Services Creditor's Name 803 N. 16th St, Suite A Number Street Laurel, MS MS 39440	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	*Action Financial erroneously repo	\$ 5,000.00	\$ <u>18,000.00</u>
community debt Date debt was incurred 2 Action Financial Services Creditor's Name 803 N. 16th St, Suite A Number Street Laurel, MS MS 39440 City State ZIP Code Who owes the debt? Check one.	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	*Action Financial erroneously repo	\$ 5,000.00	\$ <u>18,000.00</u>
community debt Date debt was incurred 2 Action Financial Services Creditor's Name 803 N. 16th St, Suite A Number Street Laurel, MS MS 39440 City State ZIP Code	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	*Action Financial erroneously repo	\$ 5,000.00	\$ 18,000.00
community debt Date debt was incurred 2 Action Financial Services Creditor's Name 803 N. 16th St, Suite A Number Street Laurel, MS MS 39440 City State ZIP Code Who owes the debt? Check one.	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured	*Action Financial erroneously repo	\$ 5,000.00	\$ 18,000.00
community debt Date debt was incurred 2 Action Financial Services Creditor's Name 803 N. 16th St, Suite A Number Street Laurel, MS MS 39440 City State ZIP Code Who owes the debt? Check one.	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	*Action Financial erroneously repo	\$ 5,000.00	\$ 18,000.00
community debt Date debt was incurred 2 Action Financial Services Creditor's Name 803 N. 16th St, Suite A Number Street Laurel, MS MS 39440 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	*Action Financial erroneously repo	\$ 5,000.00	\$ 18,000.00
community debt Date debt was incurred 22 Action Financial Services Creditor's Name 803 N. 16th St, Suite A Number Street Laurel, MS MS 39440 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a Aug 2	by Mother, dec Last 4 digits of account number Describe the property that secures the claim: 2013 Lexus IS 250 car 100,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	*Action Financial erroneously repo	\$ 5,000.00	\$ <u>18,000.00</u>

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Additional Page After listing any entries on this p by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Number Street				
City State ŽIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Number Street				
	As of the date you file, the claim is: Check all that apply.	oo		
	☐ Contingent☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Number Street		1		
Number Sueet		J		
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-1		
Date debt was incurred	Last 4 digits of account number			

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Debtor 1 Ma

Margaret Wells Williams

Middle Name Last Name

Case number (if known)___

	any of the debts that	you listed in Part 1, lis	creditor in Part 1, and then list the collection agency here. Similarly, it the additional creditors here. If you do not have additional persons	
David E. Flautt, Esquire Name McCalla, Raymer, Leibert, Pierce LLC			On which line in Part 1 did you enter the creditor? $\frac{2.1}{}$	
			Last 4 digits of account number 6 0 7 0	
Number Street				
299 South 9th Street, Suit	e 205			
Oxford	MS	38655		
City	State	ZIP Code		
Reverse Mortgage Fundir	ng, LLC CeLink		On which line in Part 1 did you enter the creditor?	
Name 3900 Capital City Blvd			Last 4 digits of account number <u>6</u> <u>0</u> <u>7</u> <u>0</u>	
Number Street				
Lansing	MI	48906		
City	State	ZIP Code		
			On which line in Part 1 did you enter the creditor?	
Name			Last 4 digits of account number	
Number Street				
City	State	ZIP Code		
			On which line in Part 1 did you enter the creditor?	
Name			Last 4 digits of account number	
Number Street				
City	State	ZIP Code	On which line in Part 1 did you enter the creditor?	
Name			Last 4 digits of account number	
Number Street				
City	State	ZIP Code		
			On which line in Part 1 did you enter the creditor?	
Name			Last 4 digits of account number	
Number Street				
City	State	ZIP Code	ment Reset	

n this information to identify your case:		
or 1 Margaret Wells Williams First Name Middle Name	Last Name	
or 2 USE, if filing) First Name Middle Name	Last Name	
ed States Bankruptcy Court for the: Southern Dist	rict of Mississippi	
number		
own)		☐ Check if this
		amended filir
official Form 106Dog		
official Form 106Dec		
eclaration About a	an Individual Debtor's S	chedules 12/
two married people are filing together, bot	h are equally responsible for supplying correct inform	nation.
	nkruptcy schedules or amended schedules. Making a mection with a bankruptcy case can result in fines up and 3571.	
Sign Below		
	no is NOT an attorney to help you fill out bankruptcy f	orms?
₩ No		
	. Attach Bankruptcy Peti	tion Preparer's Notice, Declaration, and
₩ No		tion Preparer's Notice, Declaration, and
₩ No	. Attach Bankruptcy Peti	tion Preparer's Notice, Declaration, and
₩ No	. Attach Bankruptcy Peti	tion Preparer's Notice, Declaration, and
₩ No Yes. Name of person Under penalty of perjury, I declare that I	. Attach Bankruptcy Peti	tion Preparer's Notice, Declaration. and n 119).
₩ No Yes. Name of person	. Attach Bankruptcy Pett Signature (Official Form	tion Preparer's Notice, Declaration. and n 119).
₩ No Yes. Name of person Under penalty of perjury, I declare that I	. Attach Bankruptcy Peti Signature (Official Form have read the summary and schedules filed with this	tion Preparer's Notice, Declaration. and n 119).
Ves. Name of person Under penalty of perjury, I declare that I that they are true and correct.	. Attach Bankruptcy Pett Signature (Official Form have read the summary and schedules filed with this	tion Preparer's Notice, Declaration. and n 119).
₩ No Yes. Name of person Under penalty of perjury, I declare that I	. Attach Bankruptcy Peti Signature (Official Form have read the summary and schedules filed with this	tion Preparer's Notice, Declaration. and n 119).
Ves. Name of person Under penalty of perjury, I declare that I that they are true and correct.	. Attach Bankruptcy Peti Signature (Official Form have read the summary and schedules filed with this Signature of Debtor 2	tion Preparer's Notice, Declaration. and n 119).
✓ No Yes. Name of person Under penalty of perjury, I declare that I that they are true and correct. Signature of Debtor 1	Attach Bankruptcy Pett Signature (Official Form Signature) Attach Bankruptcy Pett Signature (Official Form Signature) Attach Bankruptcy Pett Signature of Debtor 2	tion Preparer's Notice, Declaration. and n 119).
✓ No Yes. Name of person Under penalty of perjury, I declare that I that they are true and correct. Signature of Debtor 1	. Attach Bankruptcy Peti Signature (Official Form have read the summary and schedules filed with this Signature of Debtor 2	tion Preparer's Notice, Declaration. and n 119).

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Arid Attachment

Fill in this information to identify your case:				
Debtor 1 Margaret Wells Williams				
First Name Middle Name Debtor 2	Last Name			
(Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Southern District	of Mississippi			
Case number				ck if this is an
(If known)			ame	ided illing
Official Form 106E/F				
Schedule E/F: Creditors W	ho Have Unsecured (Claims		12/15
Be as complete and accurate as possible. Use Part List the other party to any executory contracts or uteral A/B: Property (Official Form 106A/B) and on Sched creditors with partially secured claims that are listeneeded, copy the Part you need, fill it out, number any additional pages, write your name and case number 1: List All of Your PRIORITY Unsecurity	nexpired leases that could result in a claim ule G: Executory Contracts and Unexpired ed in Schedule D: Creditors Who Have Clain the entries in the boxes on the left. Attach to mber (if known).	n. Also list executory co Leases (Official Form 1 ms Secured by Property	ontracts on Sont 06G). Do not . If more space	chedule include any ce is
Do any creditors have priority unsecured claim				
No. Go to Part 2.				
☐ Yes.				
List all of your priority unsecured claims. If a creach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	a claim has both priority and nonpriority amou claims in alphabetical order according to the cr Part 1. If more than one creditor holds a partic	nts, list that claim here an reditor's name. If you hav cular claim, list the other c	nd show both pe more than to	priority and vo priority
(For an explanation of each type of claim, see the i	nstructions for this form in the instruction book	let.) Total claim	Priority	Nonpriority
			amount	amount
1	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?	_		
	As of the date you file, the claim is: Check a	Il that apply.		
	Contingent	,		
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
☐ Debtor 1 only				
Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Domestic support obligations			
	Taxes and certain other debts you owe the go			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you	were		
Is the claim subject to offset?	intoxicated			
U No □ Yes	Other. Specify			
2				
Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	_ \$
,	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check a	Il Abed comb.		
	· ·	ш шасарру.		
<u> </u>	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	■ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	☐ Taxes and certain other debts you owe the go	overnment		
☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Claims for death or personal injury while you			
Is the claim subject to offset?	intoxicated Other, Specify			
No	O			

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Debtor 1 Margaret Wells Williams
First Name Middle Name Last Name

Case number (if known)

Pari	1: Your PRIORITY Unsecured Claims	- Continuation Page			
Afte	r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
J	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated			
		☐ Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other. Specify			
	Is the claim subject to offset?				
	□ No				
	Yes	THE PROPERTY RESIDENCE OF CONTROL	_ associatescripture	eticaj anti-vido-daski ajuk, avalatica pok	dragoscantenis. Harristorgan etagrang saga
		Last 4 digits of account number	\$	\$	_ \$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		_			
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	☐ At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other. Specify			
	Is the claim subject to offset?				
	□ No				
_	ā.:·	alle and the control of the control		THE TOTAL STATE STATE OF THE ST	skettotti irlaktiritromedak
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated		N/APT-MANAGE-MARKANTANAGE	and the second s
	Is the claim subject to offset?	Other. Specify			
	□ No				
	✓ Yes				

		19-50836-KMS	Dkt 1	Filed 05/01/19	Entered 05/01/19 16:10:42	Page 38 of	f 59	
Debtor 1		Margaret Wells Willia First Name Middle Name		st Name	Case number (if known)			
Pa	rt 2:	List All of Your NONP	RIORITY	Unsecured Claims				
		y creditors have nonpriorit You have nothing to report s	•	,	? ecourt with your other schedules.			
	nonpri include	ority unsecured claim, list the	e creditor s e creditor h	separately for each claim olds a particular claim, l	order of the creditor who holds each clain. For each claim listed, identify what type of ist the other creditors in Part 3.If you have to	of claim it is. Do not	t list claims already	
							Total claim	
1.1	AD	ASTRA RECOVERY S	SERVICE	S	Last 4 digits of account number 0 0	5 2	700.00	

	1			Total	claim		
1	AD ASTRA RECOVERY SERVICES		Last 4 digits of account number 0 0 5 2	•	708.00		
	Nonpriority Creditor's Name 7330 West 33rd St N Suite 118		When was the debt incurred? 11/11/2017	Φ			
	Number Street						
	Wichita KS City State	67205 ZIP Code	As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only		Contingent Unliquidated Disputed				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify 10an	i.			
2	The Bank of Missouri- Visa		Last 4 digits of account number 0 4 9 9 When was the debt incurred? 03/02/2017	\$	387.00		
	Nonpriority Creditor's Name P.O. Box 85710 Number Street		When was the debt incurred? U3/U2/2017				
	Sioux Falls SD	57118	As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ZIP Code	 ☐ Contingent ☐ Unliquidated ☑ Disputed Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another Check if this claim is for a community debt		Student loansObligations arising out of a separation agreement or divorce				
	Is the claim subject to offset? ☑ No ☑ Yes		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit Card</u>	•			
3	Center Point Energy Services Nonpriority Creditor's Name P.O. Box 1700		Last 4 digits of account number 6 6 1 4 When was the debt incurred? 12/04/2008	\$	388.00		
	Number Street Houston TX City State	77251	 As of the date you file, the claim is: Check all that apply. 				
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	ZII OOUG	☐ Contingent☐ Unliquidated☐ Disputed☐				
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	☑ No □ Yes		Debts to pension or profit-sharing plans, and other similar debtsOther. Specify <u>utilities</u>	•			

Debtor	r 1 First Name Middle Name Last Name	Case number (if known)	
Part	2: Your NONPRIORITY Unsecured Claims — Continuat	ion Page	
After	listing any entries on this page, number them beginning with 4.	4, followed by 4.5, and so forth.	Total claim
	Franklin Collection Agency	Last 4 digits of account number 8 4 2 9	\$_1,998.67
	Nonpriority Creditor's Name PO Box 3910	When was the debt incurred? 04/05/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Tupleo MS 38803 City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify utilities	
4.5	Jones County Tax Collector Assessor	Last 4 digits of account number 2 6 0 5	\$ 2,290.70
	Nonpriority Creditor's Name Ellisville Courthouse 101 N. Court St Suite A	When was the debt incurred? 12/13/2012	
	Number Street Ellisville 39437	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☑ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset? ☐ No ☐ Yes	☑ Other Specify medical bills	
4.6	Healthcare Financial Services	Last 4 digits of account number	_{\$_} 1,197.00
	Nonpriority Creditor's Name 911 Flynt Drive	When was the debt incurred? 12/13/2012	
	Number Street Flowood 39232	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only		
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another against Margaret Hortman	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	judgment Check if this claim is for a community debt in Jones County, MS	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bulls	
	No Yes	Otter. Specify W.C. of P. C. D. L. D	

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Debtor 1

Иa	rgaret	Wells	Williams	
_				-

First Name Middle Name

Last Name

Case number (if known)____

listing any entries on this page	e, number them	beginning with	4.4, followed by 4.5, and so forth.	Total claim
Plaza Services	107		Last 4 digits of account number 6 3 4 0	\$ 270.00
Ionpriority Creditor's Name 110 Hammond Drive			When was the debt incurred? 07/10/2018	
lumber Street Atlanta	GA	30328	 As of the date you file, the claim is: Check all that apply. 	
City City	State	ZIP Code	Contingent	
Who incurred the debt? Check one	е.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			- Disputou	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and an	other		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?			Other. Specify Utilities	
□ No				
Yes				
South Central Regional M	edical Center		Last 4 digits of account number	\$_9,500.0
Nonpriority Creditor's Name			When was the debt incurred? 01/02/2012	
1220 Jefferson St				
Laurel, MS	MS	39440	As of the date you file, the claim is: Check all that apply.	
Dity	State	ZIP Code	Contingent	
Who incurred the debt? Check on	e.		Unliquidated	
	e. t Margaret Hort	man	☑ Disputed	
	ent in Jones Co		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and ar	nother		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
			Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?			✓ Other Specify medical bills	
☑ No □ Yes				
South Central Clinics			Last 4 digits of account number	\$_4,500.0
Nonpriority Creditor's Name			04/04/0044	
1220 Jefferson St			When was the debt incurred? 01/01/2014	
Number Street Laurel, MS	MS	39440	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
			Unliquidated	
Who incurred the debt? Check on	e.		☑ Disputed	
	st Margaret Ho		Type of NONDPIODITY uncontrad claim:	
Debtor 2 only judgm Debtor 1 and Debtor 2 only	ent in Jones C	ounty, MS	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and ar	nother		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
Chack if this slaim is far	mmunitu daht		you did not report as priority claims	
Check if this claim is for a co	mmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			✓ Other. Specify medical bills	
☑ No				

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Debtor 1

Margaret Wells Williams		IS	Case number (# known)
First Name	Middle Name	Last Name	

Pari	2: Your NONPRIORITY Unsecure	ed Cla	ims — Continu	ation Page	
Afte	r listing any entries on this page, numbe	er them	beginning with	4.4, followed by 4.5, and so forth.	Total claim
10	Verizon Wireless Services			Last 4 digits of account number 4 7 4 0	_{\$} 4,213.00
	Nonpriority Creditor's Name PO Box 650051			When was the debt incurred? 08/16/2012	
	Number Street Dallas T	X	75526	As of the date you file, the claim is: Check all that apply.	
	City Stat Who incurred the debt? Check one.		ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐	
	Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community Is the claim subject to offset? No Yes	debt		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify utilities	
l _{/, 11}	Wesley Medical Center Nonpriority Creditor's Name			Last 4 digits of account number	\$ <u>14,500.00</u>
	Street Hattiesburg MS City State State			-	
				As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bills	
	Nonpriority Creditor's Name			Last 4 digits of account number	\$
				When was the debt incurred?	
	Number Street V	/IS		As of the date you file, the claim is: Check all that apply.	
	City Sta Who incurred the debt? Check one.	ate	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐ □ Uniquidated☐ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
	□ Debtor 1 only against Marga □ Debtor 2 only judgment in Jo □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community	/ debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☑ No ☑ Yes			Other. Specify	

			Case number (if known)
Eired Name	Middle Name	Look Money	

Part 3: List Others to Be Notified About a Debt That You Already Listed

xample, i , then list dditional (t the collection ag creditors here. If y	gency here. Simil ou do not have a	arly, if you have Idditional perso	e more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Clai
	· · · · · · · · · · · · · · · · · · ·			Last 4 digits of account number
City		State	ZIP Code	<u> </u>
•				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				on which entry in rate rorr are 2 and you had the original creater.
N				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
		······································		
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				_
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
				Part 2: Creditors with Nonpriority Unsecured Claims
	1			Last 4 digits of account number
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Ivaillo				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
City		State	ZIF Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name		-		
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
				Claims
				Last 4 digits of account number
City		State	ZIP Code	**************************************
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
1441116				Line of (Chack one): Dept 1: Creditors with Briggin Unacquired Claims
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	·····		· ·	Claims
				Last 4 digits of account number
City		State	ZIP Code	East 7 digits of account number

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
from Part 1	6a. Domestic support obligations	6a.	\$	0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	0
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$	0.00
	6j. Total. Add lines 6f through 6i.	6j.		0.00

0.00

Fill in this information to identify your case:								
Debtor	Margaret Wells Williams							
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse If filing)	First Name	Middle Name	Last Name	=.64				
United States Bankruptcy Court for the: Southern District of Mississippi								
Case number(If known)								

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company wit	th whom you	have the contract or lease	State what the contract or lease is for
2.1					
	Name			, , , , , , , , , , , , , , , , , , , ,	_
	Number	Street			_
-	City		State	ZIP Code	_
2.2					
	Name	· ·			
	Number	Street			
	City		State	ZIP Code	
2.3					_
	Name				
	Number	Street			
_	City		State	ZIP Code	
2.4					_
	Name				
	Number	Street			_
-	City		State	ZIP Code	
2.5					_
	Name				
	Number	Street			_
	City		State	ZIP Code	···

Margaret Wells Williams Debtor 1 Case number (if known) Last Name Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 22 Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code 2._ Name Number Street City ZIP Code State Name Number Street City ZIP Code State 2._ Name Number Street Crty State ZIP Code 2._ Name Number Street City State ZIP Code Name Number Street City ZIP Code State Name Number Street City State ZIP Code Add Attachment

Debtor 1	Margaret Wells Williams				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I					

Check if this is an amended filing

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

0	you have any codebtors	? (If you are filing a joint case, do no	ot list either spouse a	s a codebtor.)	
4	No				
1	Yes				
		re you lived in a community prope puisiana, Nevada, New Mexico, Puel		? (Community property states and territories include	
		Juisiana, Nevaua, New Mexico, Puei	to Nico, Texas, vvas	mington, and wisconsin.)	
	No. Go to line 3.				
4	Yes. Did your spouse, for	rmer spouse, or legal equivalent live	with you at the time?	?	
	☐ No				
	Yes. In which commu	unity state or territory did you live?		. Fill in the name and current address of that person.	
	Name of your spouse, form	ner spouse, or legal equivalent		-	
	Number Street			-	
				_	
	City	State	ZIP Code		
he C	own in line 2 again as a hedule D (Official Form hedule E/F, or Schedule	codebtor only if that person is a g 106D), Schedule E/F (Official Form	uarantor or cosigne	or if your spouse is filing with you. List the person er. Make sure you have listed the creditor on ule G (Official Form 106G). Use Schedule D,	
he C	own in line 2 again as a hedule D (Official Form	codebtor only if that person is a g 106D), Schedule E/F (Official Form	uarantor or cosigne	er. Make sure you have listed the creditor on ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe t	he
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Margaret	Wells Williams	
First Name	Middle Name	Last Name

Case number	(if known)	 	

	Additional Pag	e to List More Codebtors		
	Column 1: Your codebto			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3				Schedule D, line
	Name			Schedule E/F, line
	Number Street		****	Schedule G, line
			710.0.1	_
3	City	State	ZIP Code	
	Name			Schedule D, line
				☐ Schedule E/F, line
	Number Street			Schedule G, line
L	City	State	ZIP Code	_
3				Schedule D, line
	Name		· · · · · · · · · · · · · · · · · · ·	Schedule E/F, line
				Schedule G, line
	Number Street			
L	City	State	ZIP Code	
3				
	Name			Schedule D, line
				☐ Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	
3				_
	Name			Schedule D, line
				☐ Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	
3				
	Name			Schedule D, line
1				Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	
3				Cahadula D lina
Г	Name			Schedule D, line
1				Schedule E/F, line
	Number Street			Goriedule G, inte
	City	State	ZiP Code	
3				Cahadula D. lina
	Name	<u> </u>		Schedule D, line
	V-			Schedule G, line
	Number Street			an Corrodate O ₁ arec
	City	State	ZIP Code	w _ 1135(2007)***********************************
	A CONTRACTOR OF THE PARTY			

Print Save A

Add Attachment

Reset

Fill in this information to identify	your case:				
Debtor 1 Margaret Wells W	filliams				
First Name Debtor 2	Middle Name	Last Name			
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: 5	Southern District of Mississip	opi			
Case number (If known)				Check if the	
					ended filing plement showing postpetition chapter 13
055.15					e as of the following date:
Official Form 106I				MM / D	D / YYYY
Schedule I: You	r Income				12/15
supplying correct information. If yo	ou are married and not filings is not filings with you, de top of any additional page	ng jointly, and you o not include info	ur spouse is ormation abo	living with your spo	or 2), both are equally responsible for you, include information about your spouse use. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job,		947	tila gʻimlayingʻingiddilizindiniza ad dinala jilgida		
attach a separate page with information about additional	Employment status		ند		☐ Employed ☐ Not employed
employers. Include part-time, seasonal, or		□ Not employe	eu .		☐ Not employed
self-employed work.	Occupation	Medical Tech	nologist		
Occupation may include student or homemaker, if it applies.					
	Employer's name	Forrest Gene	ral Hospita	<u></u>	
	Employer's address	P.O. Box 163	89		
		Number Street			Number Street
		Hattiesburg	MS	39404	
		City	State ZIP		City State ZIP Code
	How long employed there	e? <u>3 mos.</u>			<u>3 mos.</u>
Part 2: Give Details About	Monthly Income				
		. If you have nothi	ng to report fo	or any line, w	rite \$0 in the space. Include your non-filing
spouse unless you are separated If you or your non-filing spouse habelow. If you need more space, at	ave more than one employer		rmation for al	ll employers f	or that person on the lines
			Foi	Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sal- deductions). If not paid monthly,			2. \$_	3,692.00	\$
3. Estimate and list monthly over	time pay.		3. +\$	30.00	+ \$
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$	3,722.00	\$

Official Form 106I Schedule I: Your Income page 1

Margaret Wells Williams
First Name Middle Name Last Name

Case number (if known)_____

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	▶ 4.	\$_3,722.00	\$	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$ 722.00	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	•	
			\$	
5d. Required repayments of retirement fund loans	5d.	\$ \$ 180.00	\$	
5e. Insurance	5e.		\$	
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify: dental, vision, accident, disability	5h.	+\$ 135.00	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ 1,037.00	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 2,685.00	\$	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				
monthly net income.	8a.	\$0.00	\$	
8b. Interest and dividends	8b.	\$0.00	\$	
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	nt			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$	
8d. Unemployment compensation	8d.	\$0.00	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive				
Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ce			
Specify:	8f.	\$	\$	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify:	8h.	+\$	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,685.00	+ \$=	\$
11. State all other regular contributions to the expenses that you list in Sched	iule J	ı.		
Include contributions from an unmarried partner, members of your household, y friends or relatives.			mmates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are			nses listed in Schedule J.	
Specify:			11. +	\$
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S			-	\$2,685.00
13. Do you expect an increase or decrease within the year after you file this to the last of the last	orm?	?		monthly income
Yes. Explain:				

Fill in this information to identify your case:				
Debtor 1 Margaret Wells Williams	Check if th	vic ic:		
First Name Middle Name Last Name Debtor 2				
(Spouse, if filing) First Name Middle Name Last Name	An ame		•	etition chapter 13
United States Bankruptcy Court for the: Southern District of Mississippi			the following	
Case number(If known)	MM / D	D/ YYYY	_	
Official Form 106J				
Schedule J: Your Expenses				12/15
Be as complete and accurate as possible. If two married people are fininformation. If more space is needed, attach another sheet to this form (if known). Answer every question.				
Part 1: Describe Your Household				
1. Is this a joint case?				
✓ No. Go to line 2.✓ Yes. Does Debtor 2 live in a separate household?				
□ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses for	Separate Household of Debtor 2.			
2. Do you have dependents?				
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent			Dependent's age	Does dependent live with you?
Do not state the dependents' names.				☐ No ☐ Yes
				□ No
				Yes
			·····	U No □ Yes
				☐ No
				Yes
				☐ No
				☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents? ☐ No Yes				
Part 2: Estimate Your Ongoing Monthly Expenses				
Estimate your expenses as of your bankruptcy filing date unless you expenses as of a date after the bankruptcy is filed. If this is a supplen applicable date.			•	
Include expenses paid for with non-cash government assistance if yo	ou know the value of			
such assistance and have included it on Schedule I: Your Income (Of			Your exper	TSES
 The rental or home ownership expenses for your residence. Includ any rent for the ground or lot. 	e first mortgage payments and	4.	\$	_
If not included in line 4:				222.00
4a. Real estate taxes		4 a.	\$	333.00
4b. Property, homeowner's, or renter's insurance		4b.	\$	267.00
4c. Home maintenance, repair, and upkeep expenses		4c.	\$	500.00 21.00
4d Homeowner's association or condominium dues		Ad	Φ.	21.00

Margaret Wells Williams
First Name Middle Name

Case number (if known)

			Your expenses
_	Additional manths are a second for a second		\$
5.	Additional mortgage payments for your residence, such as home equity loans	5,	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$80.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 250.00
	6d. Other. Specify: <u>Cell phone</u>	6d.	\$ 150.00
7-	Food and housekeeping supplies	7.	\$500.00
8.	Childcare and children's education costs	8.	\$
9-	Clothing, laundry, and dry cleaning	9.	\$50.00
10.	Personal care products and services	10.	\$50.00
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$350.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$ 20.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$170.00
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 1061).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Debtor 1	Margaret Wells Williams First Name Middle Name Last Name	se number (# known)	
1. Other. S	Specify:	21. +\$	
2. Calculat	te your monthly expenses.	And the second s	
22a. Add	d lines 4 through 21.	22a. \$	3,036.00
22b. Cor	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. \$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.	22c. \$	3,036.00
3. Calculate	e your monthly net income.		2 605 00
23a. Co	py line 12 (your combined monthly income) from Schedule I.	23a. \$	2,685.00
23b. Co	py your monthly expenses from line 22c above.	23b. - \$	3,036.00
	btract your monthly expenses from your monthly income. e result is your <i>monthly net income</i> .	23c. \$	-351.00
4. Do you e	expect an increase or decrease in your expenses within the year after you file t	his form?	
	nple, do you expect to finish paying for your car loan within the year or do you expect e payment to increase or decrease because of a modification to the terms of your mo	•	
☑ No.			
Yes.	Explain here:		
mortgage No.	e payment to increase or decrease because of a modification to the terms of your mo	•	

Official Form 106J

Debtor 1 IVIAI GAFET VVEIIS V First Name			
1 100110	Middle Name	Last Name	
Debtor 2			
(Spouse, if filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:	Southorn District of	Mississippi	
Onited States Bankrupicy Court for the:	Southern District of	Mississippi	
Case number			☐ Check if this is a
(If known)	= 100=0.00		amended filing
			•

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ 300,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$7,000.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 307,880.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$ 548,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	s 0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	. •
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 39,244.00
Your total liabilities	\$587,244.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	. \$
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	. \$

Margaret Wells Williams Debtor 1 Case number (if known) Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 3,722.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 0.00 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 0.00 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as 0.00 priority claims. (Copy line 6g.) 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) 0.00 9g. Total. Add lines 9a through 9f.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 2 of 2

Fill in this int	formation to id	entify your case:	ZAR SEL
Debtor 1	Margaret W	ells Williams	Last Name
Debtor 2 (Spouse, if filing)		Middle Name	Last Name
United States f	Bankruptcy Court	for the: Southern District of I	Mississippi
Case number (If known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C	
Creditor's name: Reverse Mortgage Funding, LLC	☐ Surrender the property.	□ No	
Description of 9 Twin Oaks Place, Laurel, MS 39440 property securing debt: Homestead house	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	☑ Yes	
securing debt.	Retain the property and [explain]: <u>have the</u> Court determine the mortgage as void		
Creditor's name: Action Financial Services	☐ Surrender the property.	□ No	
numo.	☑ Retain the property and redeem it.	☑ Yes	
Description of 2013 SI 250 Lexus car with 100,000 plus property securing debt: miles	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	No	
name:	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	☐ Retain the property and [explain]:		

t 2:	List Your Unexpired Personal Property Leases				
or any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), I in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet addd. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).					
	ribe your unexpired personal property leases	Will the lease be assumed?			
Lesso	r's name:	□ No			
Descri proper	iption of leased ty:	☐ Yes			
Lessoi	r's name:	□ No			
Descri proper	iption of leased rty:	☐ Yes			
Lesso	r's name:	□ No			
Descri proper	iption of leased rty:	☐ Yes			
Lesso	r's name:	□ No			
Descri proper	iption of leased rty:	☐ Yes			
Lesso	r's name:	□No			
Descri prope	iption of leased rty:	☐ Yes			
Lesso	r's name:	□ No			
Descri proper	iption of leased rty:	☐ Yes			
Lesso	or's name:	□ No			
Descr prope	ription of leased rty:	Yes			
rt 3:	Sign Below				

Signalure a Debtor 1

Signature of Debtor 2

Date MM / DD / YYYY

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Southern District of Mississippi	
Case number (If known):	

Official Form 121

Official Form 121

Statement About Your Social Security Numbers

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in

	For Debtor 1:	For Debtor 2 (Only If Spouse Is Filing):			
. Your name	Margaret				
	First name	First name			
	Wells				
	Middle name	Middle name			
	Williams	Lostone			
	Last name	Last name			
All Social Security Numbers you have used	<u>5</u> 7				
	☐ You do not have a Social Security number.	— — — — — — —☐ You do not have a Social Security number.			
	Tod do not have a obcial Security humber.	Tod do not have a gootal decanty humber.			
. All federal Individual		•			
Taxpayer	9	9			
Identification	0	0.			
		9			
Numbers (ITIN) you	9				
		☐ You do not have an ITIN			
Numbers (ITIN) you have used	You do not have an ITIN.	☐ You do not have an ITIN.			
Numbers (ITIN) you		☐ You do not have an ITIN.			
Numbers (ITIN) you have used	You do not have an ITIN.	☐ You do not have an ITIN. Under penalty of perjury, I declare that the information			
Numbers (ITIN) you have used					
Numbers (ITIN) you have used	You do not have an ITIN. Under penalty of perjury, I declare that the information	Under penalty of perjury, I declare that the information I have provided in this form is true and correct.			
Numbers (ITIN) you have used	You do not have an ITIN. Under penalty of perjury, I declare that the information I have provided in this form to be and correct.	Under penalty of perjury, I declare that the information			
Numbers (ITIN) you have used	You do not have an ITIN. Under penalty of perjury, I declare that the information	Under penalty of perjury, I declare that the informatio I have provided in this form is true and correct.			
Numbers (ITIN) you have used	You do not have an ITIN. Under penalty of perjury, I declare that the information I have provided in this form to be and correct.	Under penalty of perjury, I declare that the information I have provided in this form is true and correct.			

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Fill in this information to identify your case:	Check one box only as directed in this form and in
Debtor 1 Margaret Wells Williams	Form 122A-1Supp:
First Name Middle Name Last Name Debtor 2	1. There is no presumption of abuse.
(Spouse, if filing) First Name Medde Name Last Name United States Bankruptcy Court for the: Southern District of Mississippi	 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).
Case number(If known)	3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A-1	
Chapter 7 Statement of Your Current Montl	hly Income 12/15
space is needed, attach a separate sheet to this form. Include the line number to which additional pages, write your name and case number (if known). If you believe that you do not have primarily consumer debts or because of qualifying military service, complete the service of the service of the service of qualifying military service, complete the service of qualifying military service, complete the service of qualifying military service, complete the service of the	are exempted from a presumption of abuse because you
What is your marital and filing status? Check one only.	
□ Not married. Fill out Column A, lines 2-11. □ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2	2-11.
☐ Married and your spouse is NOT filing with you. You and your spouse are:	
Living in the same household and are not legally separated. Fill out both C	Columns A and B, lines 2-11.
Living separately or are legally separated. Fill out Column A, lines 2-11; do under penalty of perjury that you and your spouse are legally separated under spouse are living apart for reasons that do not include evading the Means Test	nonbankruptcy law that applies or that you and your
Fill in the average monthly income that you received from all sources, derived dubankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 1: August 31. If the amount of your monthly income varied during the 6 months, add the in Fill in the result. Do not include any income amount more than once. For example, if both income from that property in one column only. If you have nothing to report for any line,	5, the 6-month period would be March 1 through acome for all 6 months and divide the total by 6. th spouses own the same rental property, put the
income norm that property in one column only. If you have nothing to report for any line,	Column A Column B Debtor 1 Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>3,722.0</u> 0 \$
 Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 	\$0.00 \$
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.0</u> 0 \$
5. Net income from operating a business, profession, or farm Or some receipts (before all deductions).	
Gross receipts (before all deductions) \$ \$ Ordinary and necessary operating expenses -\$ -\$	
Net monthly income from a business, profession, or farm \$ 00 \$ here	
6. Net income from rental and other real property Gross receipts (before all deductions) Debtor 1 S \$	
Ordinary and necessary operating expenses -\$	
Net monthly income from rental or other real property \$S	\$\$
7. Interest, dividends, and royalties	\$

btor 1 Margaret Wells Williams First Name Madde Name Last Hame		Case numb	DEF (if known)		
		Column Debtor		Column 8 Debtor 2 or non-filing spouse	
Unemployment compensation		·	0.00	e	
Do not enter the amount if you contend that the amount under the Social Security Act. Instead, list it here:	Ψ	Φ	3.50	Φ	
For your spouse					
Pension or retirement income. Do not include any am benefit under the Social Security Act.	· · · · · · · · · · · · · · · · · · ·	S	0.00	s	
Do not include any benefits received under the Social S as a victim of a war crime, a crime against humanity, or terrorism. If necessary, list other sources on a separate	security Act or payments received international or domestic			-	
		\$	0.00	\$	
		\$		\$	
Total amounts from separate pages, if any.		+\$		+\$	
Calculate your total current monthly income. Add lin column. Then add the total for Column A to the total for		\$ 3	,722.00	\$	S 3722
art 2: Determine Whether the Means Test Ap	plies to You				
2. Calculate your current monthly income for the year.	Follow these steps:				
12a. Copy your total current monthly income from line	11		Co	oy line 11 here 🗲	\$ 3722
Multiply by 12 (the number of months in a year).					x 12
12b. The result is your annual income for this part of the	ne form.			12b.	\$ <u>44,664.00</u>
3. Calculate the median family income that applies to	you. Follow these steps:				
Fill in the state in which you live.	MS				
Fill in the number of people in your household.	3				
Fill in the median family income for your state and size To find a list of applicable median income amounts, go instructions for this form. This list may also be available	online using the link specified in			13.	\$ 45,536.00
4. How do the lines compare?					
14a. Line 12b is less than or equal to line 13. On th	e top of page 1, check box 1, The	ere is no	presumption	of abuse.	
14b. Line 12b is more than line 13. On the top of pa Go to Part 3 and fill out Form 122A-2.	age 1, check box 2, The presump	tion of ab	use is deter	mined by Form 122.	A-2.
Part 3: Sign Below					
By signing here, I declar under penalty of perj	ury that the information on this sta	atement :	and in any a	ttachments is true a	nd correct.
* Now Ar U	×				
Signature of Debtor 1	Sig	nature of	Debtor 2		
Date 5-1-19	Da	te MM /	DD /YYYY	-	
If you checked line 14a, do NOT fill out or fi	le Form 122A-2.				
If you checked line 14b, fill out Form 122A-	2 and file it with this form.				